Effective October 1, 2001

Application	or Docket	Number
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		Liicot									
		S FILED - PART (Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		18				RATE	FEE]	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC F	E 370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		. 9		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 1		X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT						+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II									OTHER	
		(Column 1)		(Colui		(Column 3)	SMAL	L ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus			=	X42=		OR	X84=	
<u> </u>	FINOT FNESE	INTATION OF IM	JETIPLE DEF	CINDEIN	CLANV		+140=		OR	+280=	
								E	OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. –			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	E CLAIM	=	X42=		OR	X84=	
	THOT FRESE	IVIATION OF MI	+140=		OR	+280=					
							TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	_		_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> -</u>	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			 	1		
*	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2. writi	e "0" in co	olumn 3.	+140=		OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE											
		nber Previously Pa					found in the	appropriate bo	x in co	lumn 1.	